

Box No. IX CHECK LIST; LANGUAGE OF FILING

This international application contains:		This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):		Number of items
(a) in paper form, the following number of sheets:				
request (including declaration sheets)	: 9	<input checked="" type="checkbox"/>	fee calculation sheet	: 1
description (excluding sequence listing and/or tables related thereto)	: 16	<input type="checkbox"/>	original separate power of attorney	:
claims	: 2	<input type="checkbox"/>	original general power of attorney	:
abstract	: 1	<input checked="" type="checkbox"/>	copy of general power of attorney; reference number, if any:	: 4
drawings	: 0	<input checked="" type="checkbox"/>	priority document(s) identified in Box No. VI as item(s):	:
Sub-total number of sheets	28	<input type="checkbox"/>	statement explaining lack of signature	:
sequence listing	:	<input type="checkbox"/>	translation of international application into (language):	:
tables related thereto	:	<input type="checkbox"/>	separate indications concerning deposited microorganism or other biological material	:
(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)		<input type="checkbox"/>	sequence listing in computer readable form (indicate type and number of carriers)	:
Total number of sheets	: 28	(i) <input type="checkbox"/>	copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)	:
(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))		(ii) <input type="checkbox"/>	(only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter	:
(i) <input type="checkbox"/> sequence listing		(iii) <input type="checkbox"/>	together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column	:
(ii) <input type="checkbox"/> tables related thereto		10. <input type="checkbox"/>	tables in computer readable form related to sequence listing (indicate type and number of carriers)	:
(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))		(i) <input type="checkbox"/>	copy submitted for the purposes of international search under Section 802(b-quarter) only (and not as part of the international application)	:
(i) <input type="checkbox"/> sequence listing		(ii) <input type="checkbox"/>	(only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quarter)	:
(ii) <input type="checkbox"/> tables related thereto		(iii) <input type="checkbox"/>	together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column	:
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the		11. <input checked="" type="checkbox"/>	other (specify): Return Postcard, Cover Letter	:
<input type="checkbox"/> sequence listing:				
<input type="checkbox"/> tables related thereto:				
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)				

Figure of the drawings which should accompany the abstract:

Language of filing of the international application: English

Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

DOW CORNING CORPORATION

By: _____

James L. DeCesare

COPY

For receiving Office use only		2. Drawings: <input type="checkbox"/> received: <input type="checkbox"/> not received:
1. Date of actual receipt of the purported international application:		
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:		
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA/	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	

For International Bureau use only

Date of receipt of the record copy by the International Bureau:

This sheet is not part of and does not count as a sheet of the international application.

PCT

FEE CALCULATION SHEET Annex to the Request

For receiving Office use only

International Application No.

Applicant's or agent's
file reference

SN141 PCT 1

Date stamp of the receiving Office

Applicant

DOW CORNING CORPORATION, et al.

CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE

300.00

T

2. SEARCH FEE

1,920.00

S

International search to be carried out by EP

(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FILING FEE

Where item (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets
Where item (b) and (c) of Box No. IX do not apply, enter Total number of sheets

}

28

i1 first 30 sheets

1,134.00

i1

i2 0 x 12.00 = 0.00

number of sheets in
excess of 30

i2

i3 additional component (only if sequence listing and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):

400 x _____ = _____ i3

fee per sheet

Add amounts entered at i1, i2 and i3 and enter total at I

1,134.00

I

(Applicants from certain States are entitled to a reduction of 75% of the international filing fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the international filing fee.)

4. FEE FOR PRIORITY DOCUMENT (if applicable)

P

5. TOTAL FEES PAYABLE

3,354.00

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

TOTAL

MODE OF PAYMENT

authorization to charge
deposit account (see below)

postal money order

cash

coupons

cheque

bank draft

revenue stamps

other (specify):

AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT

(This mode of payment may not be available at all receiving Offices)

Receiving Office: US

Authorization to charge the total fees indicated above.

Deposit Account No.: 04-1520

(This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.

Date: 12-9-04

Authorization to charge the fee for priority document.

Name: James L. DeCesare

Signature: *Malley*